

PART B - FEE(S) TRANSMITTAL

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7590

02/24/2009

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Maria Lapitan	(Depositor's name)
<i>William S. Frommer</i>	(Signature)
May 19, 2009	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/517,073	06/02/2005	Fumiyoshi Abe	450100-04618	8647

TITLE OF INVENTION: VIDEO TAPE RECORDER AND RECORDING METHOD

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1510	\$300	\$0	\$1810	05/26/2009

EXAMINER	ART UNIT	CLASS-SUBCLASS
SHIBRU, HELEN	2621	386-112000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. **Use of a Customer Number is required.**

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

FROMMER LAWRENCE &

1 HAUG LLP

2 WILLIAM S. FROMMER

3 THOMAS F. PRESSON

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

SONY CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

TOKYO, JAPAN

Please check the appropriate assignee category or categories (will not be printed on the patent): ☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are submitted:

- ☒ Issue Fee
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- ☒ Advance Order - # of Copies 3

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- ☐ A check is enclosed.
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- ☐ The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 50-0320 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27.
- ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature

Thomas F. Presson
 Thomas F. PRESSON 41,442 for

Date

May 19, 2009

Typed or printed name

WILLIAM S. FROMMER

Registration No.

25,506

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